

Women/Maternal Health

State Action Plan Table (Nevada) - Women/Maternal Health - Entry 1

Priority Need

Improve preconception and interconception health among women of childbearing age

NPM

NPM 1 - Percent of women, ages 18 through 44, with a preventive medical visit in the past year

Objectives

Increase the percent of women ages 15-44 receiving routine checks-up in the previous year to 70% by 2020

Increase to 77.9% the percent of women receiving prenatal care in first trimester by 2020

Strategies

Collaborate with public and private partners to provide target population with information on the benefits available through the Affordable Care Act and link them to appropriate health care coverage options

Collaborate with public and private partners to engage (outreach) and educate (e.g. website, materials, etc.) target population, communities, and health care professionals, regarding women's health, including early prenatal care and screenings

Collaborate with public and private partners to conduct training at schools and on college campuses focused on rape and sexual assault prevention

Partner to conduct and/or fund survey activities that ask questions regarding pre and interconception care

Collaborate with MCH Coalition and other partners to improve health literacy, including health promotion campaigns and dissemination of health information (including translation/interpretation)

Collaborate with public and private partners to conduct data collection, surveying, and other activities to improve maternal health and birth outcomes

ESMs

Status

ESM 1.1 - Percent of pregnant women who received prenatal care beginning in the first trimester

Active

NOMs

NOM 2 - Rate of severe maternal morbidity per 10,000 delivery hospitalizations

NOM 3 - Maternal mortality rate per 100,000 live births

NOM 4 - Percent of low birth weight deliveries (<2,500 grams)

NOM 5 - Percent of preterm births (<37 weeks)

NOM 6 - Percent of early term births (37, 38 weeks)

NOM 8 - Perinatal mortality rate per 1,000 live births plus fetal deaths

NOM 9.1 - Infant mortality rate per 1,000 live births

NOM 9.2 - Neonatal mortality rate per 1,000 live births

NOM 9.3 - Post neonatal mortality rate per 1,000 live births

NOM 9.4 - Preterm-related mortality rate per 100,000 live births

NOM 10 - Percent of women who drink alcohol in the last 3 months of pregnancy

NOM 11 - Rate of neonatal abstinence syndrome per 1,000 birth hospitalizations

NOM 23 - Teen birth rate, ages 15 through 19, per 1,000 females

NOM 24 - Percent of women who experience postpartum depressive symptoms following a recent live birth

State Action Plan Table (Nevada) - Women/Maternal Health - Entry 2

Priority Need

Reduce substance use during pregnancy

NPM

NPM 14.1 - Percent of women who smoke during pregnancy

Objectives

Reduce the number of women who smoke during pregnancy.

Strategies

ESM 14.2.1: Number of pregnant women and new mothers who called the Quitline for assistance in the past 12 months.

ESMs

Status

ESM 14.1.1 - Percent of PRAMS respondents who report that a doctor, nurse, or other health care worker asked if they were smoking cigarettes during any prenatal care visits

Active

NOMs

NOM 2 - Rate of severe maternal morbidity per 10,000 delivery hospitalizations

NOM 3 - Maternal mortality rate per 100,000 live births

NOM 4 - Percent of low birth weight deliveries (<2,500 grams)

NOM 5 - Percent of preterm births (<37 weeks)

NOM 6 - Percent of early term births (37, 38 weeks)

NOM 8 - Perinatal mortality rate per 1,000 live births plus fetal deaths

NOM 9.1 - Infant mortality rate per 1,000 live births

NOM 9.2 - Neonatal mortality rate per 1,000 live births

NOM 9.3 - Post neonatal mortality rate per 1,000 live births

NOM 9.4 - Preterm-related mortality rate per 100,000 live births

NOM 9.5 - Sudden Unexpected Infant Death (SUID) rate per 100,000 live births

NOM 19 - Percent of children, ages 0 through 17, in excellent or very good health

State Action Plan Table (Nevada) - Women/Maternal Health - Entry 3

Priority Need

Improve preconception and interconception health among women of childbearing age

Objectives

Increase to 77.9% by 2020 pregnant women/new mothers receiving prenatal care in first trimester.

Strategies

Collaborate with public and private partners to engage (outreach) and educate (e.g. website, materials, etc.) target population, communities, and health care professionals, regarding women's health, including early prenatal care and screenings.

State Action Plan Table (Nevada) - Women/Maternal Health - Entry 4

Objectives

Reduce the number of women who smoke during pregnancy.

Strategies

Collaborate with public and private partners to promote use of the State's Tobacco Quitline for pregnant women and new mothers.

Disseminate educational materials to partners for statewide distribution.

Collaborate with public and private partners to improve outcomes related to the use/misuse of other substances

Perinatal/Infant Health

State Action Plan Table (Nevada) - Perinatal/Infant Health - Entry 1

Priority Need

Breastfeeding promotion

NPM

NPM 4 - A) Percent of infants who are ever breastfed B) Percent of infants breastfed exclusively through 6 months

Objectives

Increase the percent of children who are ever breastfed to 90% by 2020

Increase the percent of children who are exclusively breastfed at 6 months to 28% by 2020

Increase the percent of baby-friendly hospitals in Nevada to 68% by 2020

Strategies

Partner with MCH Coalition on activities and website postings to increase awareness, community-wide support and business education of breastfeeding, safe sleep, etc. (includes FIMR)

Collaborate with public and private partners to increase the number of Nevada hospitals (birthing facilities) receiving training on Baby Steps to Breastfeeding Success or designated as Baby Friendly.

ESMs

Status

ESM 4.1 - Percent of Nevada PRAMS respondents who stopped breastfeeding due to a lack of support from family or friends

Active

NOMs

NOM 9.1 - Infant mortality rate per 1,000 live births

NOM 9.3 - Post neonatal mortality rate per 1,000 live births

NOM 9.5 - Sudden Unexpected Infant Death (SUID) rate per 100,000 live births

Child Health

State Action Plan Table (Nevada) - Child Health - Entry 1

Priority Need

Increase developmental screening

NPM

NPM 6 - Percent of children, ages 9 through 35 months, who received a developmental screening using a parent-completed screening tool in the past year

Objectives

Increase the percent of children (10-71 months) who receive a developmental screening using a parent-completed screening tool to 31.9% by 2020

Strategies

Collaborate with public and private partners to communicate the importance of developmental screenings, including referral to appropriate health professionals

Collaborate with MCH public and private partners to conduct outreach to educate individuals, families and communities regarding the benefits of the medical home portal for CYSHCN

Collaborate with MCH partners to train providers on the parent-completed screening tool

Collaborate with public and private partners on community events, trainings and other events/activities which include information about the importance of developmental screenings

Collaborate with MCH partners to pilot a project to develop a Medical Home toolkit to bridge the gap between families and health care providers

ESMs

Status

ESM 6.1 - Percent of Medicaid enrolled children, ages 9 through 35 months, who received a developmental screening using a standardized tool. Active

NOMs

NOM 13 - Percent of children meeting the criteria developed for school readiness (DEVELOPMENTAL)

NOM 19 - Percent of children, ages 0 through 17, in excellent or very good health

State Action Plan Table (Nevada) - Child Health - Entry 2

Priority Need

Promote healthy weight

NPM

NPM 8.1 - Percent of children, ages 6 through 11, who are physically active at least 60 minutes per day

Objectives

Increase the percent of middle school and high school students who are physically active at least 60 minutes a day to 48.8%.

Strategies

Collaborate with public and private partners to conduct survey activities to track and trend weight data for target population

Collaborate with state partners, including the educational system, to increase the percent of elementary schools that adopt a physical activity plan/policy

Collaborate with public and private partners to link children to appropriate health services, including screenings, vaccinations, etc.

Collaborate with public and private partners to expand physical activity opportunities outside of school hours

Disseminate educational materials to partners for statewide distribution

Collaborate with public and private partners to provide target population with information on the benefits available through the Affordable Care Act

Collaborate with public and private partners to conduct outreach, education, and eligibility assistance to promote utilization of family planning and link women to appropriate health services, vaccinations, screenings (breast and cervical cancer, substance use/misuse, behavioral/mental health, postpartum depression, etc.), LARC, and use of 1-key question

Collaborate with public and private partners on activities focused on bullying, rape and sexual assault prevention, suicide, and other factors that negatively impact health

NOMs

NOM 19 - Percent of children, ages 0 through 17, in excellent or very good health

NOM 20 - Percent of children, ages 2 through 4, and adolescents, ages 10 through 17, who are obese (BMI at or above the 95th percentile)

State Action Plan Table (Nevada) - Child Health - Entry 3

Priority Need

Increase adequate insurance coverage among children

NPM

NPM 15 - Percent of children, ages 0 through 17, who are continuously and adequately insured

Objectives

Increase the percent of adequately insured children

Increase the number of Title V funded partners that offer assistance with completing insurance applications, including assistance to at-risk populations and in multiple languages

Strategies

Collaborate with MCH partners to provide information on the benefits available through the Affordable Care Act

Increase information and referral across the lifespan into Medicaid and Nevada CHIP

Partner to ensure assistance with all aspects of the enrollment and renewal is provided (navigators)

NOMs

NOM 17.2 - Percent of children with special health care needs (CSHCN), ages 0 through 17, who receive care in a well-functioning system

NOM 18 - Percent of children, ages 3 through 17, with a mental/behavioral condition who receive treatment or counseling

NOM 19 - Percent of children, ages 0 through 17, in excellent or very good health

NOM 22.1 - Percent of children who have completed the combined 7-vaccine series (4:3:1:3*:3:1:4) by age 24 months

NOM 22.2 - Percent of children, ages 6 months through 17 years, who are vaccinated annually against seasonal influenza

NOM 22.3 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the HPV vaccine

NOM 22.4 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the Tdap vaccine

NOM 22.5 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the meningococcal conjugate vaccine

NOM 25 - Percent of children, ages 0 through 17, who were unable to obtain needed health care in the past year

Adolescent Health

State Action Plan Table (Nevada) - Adolescent Health - Entry 1

Priority Need

Promote healthy weight

NPM

NPM 8.2 - Percent of adolescents, ages 12 through 17 who are physically active at least 60 minutes per day

Objectives

Increase the percent of middle school and high school students who are physically active at least 60 minutes a day to 48.8%.

Strategies

Collaborate with public and private partners to conduct survey activities to track and trend weight data for target population

Collaborate with state partners, including the educational system, to increase the percent of elementary schools that adopt a physical activity plan/policy

Collaborate with public and private partners to link children to appropriate health services, including screenings, vaccinations, etc.

Collaborate with public and private partners to expand physical activity opportunities outside of school hours

Disseminate educational materials to partners for statewide distribution

Collaborate with public and private partners to provide target population with information on the benefits available through the Affordable Care Act

Collaborate with public and private partners to conduct outreach, education, and eligibility assistance to promote utilization of family planning and link women to appropriate health services, vaccinations, screenings (breast and cervical cancer, substance use/misuse, behavioral/mental health, postpartum depression, etc.), LARC, and use of 1-key question

Collaborate with public and private partners on activities focused on bullying, rape and sexual assault prevention, suicide, and other factors that negatively impact health

NOMs

NOM 19 - Percent of children, ages 0 through 17, in excellent or very good health

NOM 20 - Percent of children, ages 2 through 4, and adolescents, ages 10 through 17, who are obese (BMI at or above the 95th percentile)

State Action Plan Table (Nevada) - Adolescent Health - Entry 2

Priority Need

Improve care coordination

NPM

NPM 10 - Percent of adolescents, ages 12 through 17, with a preventive medical visit in the past year.

Objectives

Increase the percent of adolescents aged 12-17 with a preventive medical visit in the past year to 78% by 2020.

Reduce pregnancies among adolescent females aged 15 to 17 years to 36.2 pregnancies per 1,000 by 2020

Reduce pregnancies among adolescent females aged 18 to 19 years to 105.9 pregnancies per 1,000 by 2020

Strategies

Collaborate with public and private partners to provide target population with information on the benefits available through the Affordable Care Act and link them to appropriate health care coverage options

Collaborate with public and private partners to conduct outreach, education, and eligibility assistance to promote utilization of family planning and link women to appropriate health services, vaccinations, screenings (breast and cervical cancer, substance use/misuse, behavioral/mental health, postpartum depression, etc.), LARC, and use of 1-key question

Collaborate with public and private partners on activities focused on bullying, rape and sexual assault prevention, suicide, and other factors that negatively impact health

ESMs

Status

ESM 10.1 - Percent of Medicaid EPSDT eligible adolescents, ages 12 through 17, who received at least one initial or periodic screen

Active

NOMs

NOM 16.1 - Adolescent mortality rate ages 10 through 19, per 100,000

NOM 16.2 - Adolescent motor vehicle mortality rate, ages 15 through 19, per 100,000

NOM 16.3 - Adolescent suicide rate, ages 15 through 19, per 100,000

NOM 18 - Percent of children, ages 3 through 17, with a mental/behavioral condition who receive treatment or counseling

NOM 19 - Percent of children, ages 0 through 17, in excellent or very good health

NOM 20 - Percent of children, ages 2 through 4, and adolescents, ages 10 through 17, who are obese (BMI at or above the 95th percentile)

NOM 22.2 - Percent of children, ages 6 months through 17 years, who are vaccinated annually against seasonal influenza

NOM 22.3 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the HPV vaccine

NOM 22.4 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the Tdap vaccine

NOM 22.5 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the meningococcal conjugate vaccine

NOM 23 - Teen birth rate, ages 15 through 19, per 1,000 females

NOM 17.2 - Percent of children with special health care needs (CSHCN), ages 0 through 17, who receive care in a well-functioning system

State Action Plan Table (Nevada) - Adolescent Health - Entry 3

Priority Need

Increase adequate insurance coverage among children

NPM

NPM 15 - Percent of children, ages 0 through 17, who are continuously and adequately insured

Objectives

Increase the percent of adequately insured children

Increase the number of Title V funded partners that offer assistance with completing insurance applications, including assistance to at-risk populations and in multiple languages

Strategies

Collaborate with MCH partners to provide information on the benefits available through the Affordable Care Act

Increase information and referral across the lifespan into Medicaid and Nevada CHIP

Partner to ensure assistance with all aspects of the enrollment and renewal is provided (navigators)

Disseminate brochures with information regarding insurance enrollment and the importance of yearly adolescent wellness visits

NOMs

NOM 17.2 - Percent of children with special health care needs (CSHCN), ages 0 through 17, who receive care in a well-functioning system

NOM 18 - Percent of children, ages 3 through 17, with a mental/behavioral condition who receive treatment or counseling

NOM 19 - Percent of children, ages 0 through 17, in excellent or very good health

NOM 22.1 - Percent of children who have completed the combined 7-vaccine series (4:3:1:3*:3:1:4) by age 24 months

NOM 22.2 - Percent of children, ages 6 months through 17 years, who are vaccinated annually against seasonal influenza

NOM 22.3 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the HPV vaccine

NOM 22.4 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the Tdap vaccine

NOM 22.5 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the meningococcal conjugate vaccine

NOM 25 - Percent of children, ages 0 through 17, who were unable to obtain needed health care in the past year

State Action Plan Table (Nevada) - Adolescent Health - Entry 4

Priority Need

Reduce teen pregnancy

Objectives

Reduce repeat pregnancies among adolescent females aged 15 to 19 years to 15 percent by 2020.

Strategies

Collaborate with State Abstinence Education Grant Program (AEGP) and the State Personal Responsibility Education Program (PREP).

Collaborate with community partners on educational campaign focused on decreasing teen pregnancy and repeat pregnancy.

State Action Plan Table (Nevada) - Adolescent Health - Entry 5

Priority Need

Reduce teen pregnancy

Objectives

Reduce pregnancies among adolescent females to 26 pregnancies per 1,000 by 2020

Strategies

Collaborate with State Abstinence Education Grant Program (AEGP) and the State Personal Responsibility Education Program (PREP).

Collaborate with community partners on educational campaign focused on decreasing teen pregnancy.

Priority Need

Reduce substance use during pregnancy

Objectives

Reduce the percent of women who smoke during pregnancy

Reduce the percent of children who are exposed to secondhand smoke

Increase the percent of women who call the quitline for assistance

Reduce the percent of women using substances during pregnancy

Strategies

Collaborate with public and private partners to promote use of the State's tobacco Quitline for pregnant women and new mothers

Disseminate educational materials to partners for statewide distribution

Collaborate with public and private partners to improve outcomes related to the use/misuse of other substances

Children with Special Health Care Needs

State Action Plan Table (Nevada) - Children with Special Health Care Needs - Entry 1

Priority Need

Improve care coordination

NPM

NPM 11 - Percent of children with and without special health care needs, ages 0 through 17, who have a medical home

Objectives

Increase the percent of children with special health care needs with a medical home in the past year to 53.3% by 2020

Increase the percent of children without special health care needs with a medical home in the past year to 54.8% by 2020

Increase the number of WIC, Home Visiting, Healthy Start, and other program participants that received information on the benefits of a medical home

Increase the number of referrals to Nevada's medical home portal

Strategies

Partner to support the implementation of Medical Home Portal including awareness, professional development, Nevada 2-1-1 activities, etc.

Partner to identify and conduct outreach to population groups (including families) with the greatest need (e.g. racial/ethnic group, payer, rural/urban) regarding availability and benefits of Medical Home Portal

ESMs

Status

ESM 11.1 - Number of Nevada Medical Home Portal website views.

Active

NOMs

NOM 17.2 - Percent of children with special health care needs (CSHCN), ages 0 through 17, who receive care in a well-functioning system

NOM 18 - Percent of children, ages 3 through 17, with a mental/behavioral condition who receive treatment or counseling

NOM 19 - Percent of children, ages 0 through 17, in excellent or very good health

NOM 25 - Percent of children, ages 0 through 17, who were unable to obtain needed health care in the past year

State Action Plan Table (Nevada) - Children with Special Health Care Needs - Entry 2

Priority Need

Increase adequate insurance coverage among children

NPM

NPM 15 - Percent of children, ages 0 through 17, who are continuously and adequately insured

Objectives

Increase the percent of adequately insured children

Increase the number of Title V funded partners that offer assistance with completing insurance applications, including assistance to at-risk populations and in multiple languages

Strategies

Collaborate with MCH partners to provide information on the benefits available through the Affordable Care Act

Increase information and referral across the lifespan into Medicaid and Nevada CHIP

Partner to ensure assistance with all aspects of the enrollment and renewal is provided (navigators)

NOMs

NOM 17.2 - Percent of children with special health care needs (CSHCN), ages 0 through 17, who receive care in a well-functioning system

NOM 18 - Percent of children, ages 3 through 17, with a mental/behavioral condition who receive treatment or counseling

NOM 19 - Percent of children, ages 0 through 17, in excellent or very good health

NOM 22.1 - Percent of children who have completed the combined 7-vaccine series (4:3:1:3*:3:1:4) by age 24 months

NOM 22.2 - Percent of children, ages 6 months through 17 years, who are vaccinated annually against seasonal influenza

NOM 22.3 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the HPV vaccine

NOM 22.4 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the Tdap vaccine

NOM 22.5 - Percent of adolescents, ages 13 through 17, who have received at least one dose of the meningococcal conjugate vaccine

NOM 25 - Percent of children, ages 0 through 17, who were unable to obtain needed health care in the past year